

COMPLAINT FORM

If you have a complaint, please return this form with the top section completely filled out to srobertson@borough.collegeville-pa.gov

Anonymous complaints will not be addressed. Your identity will not be shared.

Complainant Name & Address: Property Owner & Address: Site Location:					
			Nature of Complaint:		
Signature of Complainant:	Date:				
***********	***********	*****			
<u>(FOF</u>	R BOROUGH USE)				
Date of On-Site Investigation:	Time:				
Person(s) Investigating:					
Findings (Citing Sections of Applicable Ordinar	nces, When Applicable):				
Recommendations:					